

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION            | INITIALS           | ID NO.    | DATE          |
|---------------------|--------------------|-----------|---------------|
| FEE DETERMINATION   |                    |           |               |
| O.I.P.E. CLASSIFIER | <i>[Signature]</i> | <i>15</i> | <i>2/3/99</i> |
| FORMALITY REVIEW    |                    |           |               |

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet her

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